

Atty. Dkt. No. 048327-2002

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: LOWELL POTIKER

Title: VOICE RESPONSE CERTIFICATE

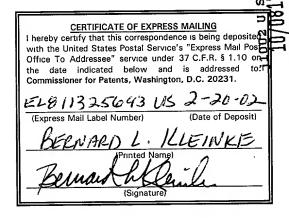
REDEMPTION SYSTEM

Appl. No.: Unknown

Filing Date: Unknown

Examiner: Unknown

Art Unit: Unknown



## UTILITY PATENT APPLICATION TRANSMITTAL

Commissioner for Patents Box PATENT APPLICATION Washington, D.C. 20231

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

Lowell Potiker

16429 Avenida de los Olivos Rancho Santa Fe, CA 92067

[X] Applicant claims small entity status under 37 CFR 1.27.

## Enclosed are:

- [X] Specification, Claim(s), and Abstract (14 pages).
- [X] Formal drawings (05 sheets, Figures 1-4B).
- [X] Declaration and Power of Attorney (04 pages).
- [ ] Assignment of the invention.
- [ ] Assignment Recordation Cover Sheet.

- [X] Small Entity statement.
- [ ] Request for application not to be published with certification under 35 USC 122(b)(2)(B)(i).
- [ ] Information Disclosure Statement.
- [ ] Form PTO-1449 with copies of listed reference(s).
- [X] Application Data Sheet (37 CFR 1.76).

The filing fee is calculated below:

*****	Claims as Filed		ncluded in Basic Fee		Extra Claims		Rate		Fee Totals
Basic Fee							\$740.00		\$740.00
Total Claims:	24	-	20	=	4	x	\$18.00	=	\$72.00
Independents:	2		3	_ =	0	×	\$84.00	=	\$0.00
If any Multiple Dependent Claim(s) present: + \$280.00							=	\$0.00	
							SUBTOTAL:	=	\$812.00
[ X ]	Small Entity Fees Apply (subtract ½ of above):							=	\$406.00
-			•				FILING FEE:	=	\$406.00

- [X] A check in the amount of \$406.00 to cover the filing fee is enclosed.
- [ ] The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.
- [X] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 50-0872. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-0872.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date 2-20-2002

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Ву

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